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JUL \$ 1 2003

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

125'	1873
OMB APPI	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours per respon	ase 16.00

SEC USE ONLY								
Prefix	Serial							
DATE F	RECEIVED							
1	1							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  ACME Payment Systems Corp.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	03028620
ACME Payment Systems Corp.	030200-1
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
525 Seymour Street, Suite 400 Vancouver BC V6B 3H7 Canada	(425) 638-0888
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	(425) 639 0999
Same as executive offices	(425) 638-0888
Brief Description of Business The research and development of various sys	<del>_</del>
secure on line transactions. The company will develop and dis	~
payment hardware for completing on line digital content trans-	action payments.
Type of Business Organization	
	please specify):
business trust limited partnership, to be formed	PROCESSED
Month Year	mated AUG 0 1 2003
	mated AUG 0 1 2003
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	·
CN for Canada; FN for other foreign jurisdiction)	CID THOMSON
OPERIOR AT INCOMPLECIMENTO	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA

- L. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter		Beneficial Owner	X	Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Robert Lee	,								
Business or Residence Addre	ss (Number ar	d Stree	t, City, State, Zip Co	ode)					
1031 Sunset Way			· -						
Check Box(es) that Apply:	Promoter		Beneficial Owner	X	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)			·					
Stephen Olson									
Business or Residence Addre	ss (Number ar	d Stree	t, City, State, Zip Co	ode)	<del></del>				
151 140th Ave. S	S.E., Bell	.evue	, WA 98005						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
John Herbert Ha	rper								
Business or Residence Addre	ss (Number a	nd Stree	t, City, State, Zip Co	ode)					
1323 Homer Stree	et, Suite	2206	, Vancouver	BC,	V6B5Tl, Cana	ada			
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)					· · · ·			
Business or Residence Addre	ss (Number ar	nd Stree	t, City, State, Zip C	ode)					•
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ess (Number a	nd Stree	t, City, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number a	nd Stree	et, City, State, Zip C	ode)			<del></del>		
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number a	nd Stree	et, City, State, Zip C	ode)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	(Han I	Jonk of	net or convinding	odd:	ional conies of this s	heet	ac necessor	<u> </u>	

					B. 1	NFORMATI	ON ABOU	T OFFERI	ŊĠ.	i distre			
1.	Has the	issper sold	or does th	e issuer ir	itend to se	ll to non-ac	ccredited in	nvestors in	this offeri	no?		Yes [X]	No
••	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										(A)	LI.	
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?										§ 500		
2.	what is the minimum investment that will be accepted from any individual?										Yes	No	
3.	Does the offering permit joint ownership of a single unit?												$\boxtimes$
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an												
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such												
										ciated pers	ons of such		
Enl			first, if indi			on for that	Droker or o	dealer only	·				
	i Name (L I/A	Jasi name	msi, n ma	viduatj									
Bus	siness or I	Residence	Address (N	umber and	Street, Ci	ity, State, Z	ip Code)						
	/A												
		ociated Br	oker or Dea	ler									
	/A	iah Dasana	I inted II.a	Calinitad		to Solicit I	)b						
Sta						to Solicit i							l Ctatas
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	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE I	NV	NH	NJ	NM	NY	NC	ND	OH	OK]	OR	PA
	RI	[SC]	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (1	_ast name :	first, if indi	vidual)									
	I/A						<del></del>			·			
	siness or I/A	Residence	Address (N	lumber an	d Street, C	City, State, 2	Zip Code)						
	·	ociated Br	oker or Dea	aler								<del> </del>	
	I/A	ociated Di	ORCI OI DE										
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)	••••••	•••••	••••••	• • • • • • • • • • • • • • • • • • • •				1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
			IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (I	Last name	first, if indi	vidual)		· · · · · · · · · · · · · · · · · · ·							
	I/A			· · · · · · · · · · · · · · · · · · ·									
		Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
	I/A												
		sociated Br	roker or Dea	aler									
	I/A tes in Wh	ich Person	Listed Has	Solicited	or Intende	s to Solicit	Purchasers						
Jia												□ AI	l States
	( C.IOOK												
	AL	[AK]	AZ	AR	CA	CO	CT	DE	DC	FL	GA D	H	ID
	IL MT	IN NE	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.  Type of Security	Aggregate Offering Pri		An	nount Already Sold
	1		-		33.2
	Debt			<b>s</b>	
	Equity	. \$ 351,000		\$	0
	Common Preferred				
	Convertible Securities (including warrants)			\$	
	Partnership Interests			\$	
	Other (Specify)	. \$		\$	
	Total	. \$ 351,000		\$	
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	te		D	Aggregate ollar Amount
		Investors		(	of Purchases
	Accredited Investors			\$_	
	Non-accredited Investors			\$_	
	Total (for filings under Rule 504 only)			\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	ne			
	Type of Offering	Type of Security		D	ollar Amount Sold
	Rule 505	·		\$_	
	Regulation A			\$_	
	Rule 504	··		\$_	
	Total	··		\$_	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	r.			
	Transfer Agent's Fees	••••••		\$	
	Printing and Engraving Costs	•••••		\$	1,000
	Legal Fees	•••••		<u>\$1</u>	8,000
	Accounting Fees			\$_	
	Engineering Fees			<b>\$</b>	
	Sales Commissions (specify finders' fees separately)		] [	<b>\$</b>	
			لب	-	
	Other Expenses (identify)			\$	

	V		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	5	\$332,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	i	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	T\$ 60,000	\$30,000
	Purchase of real estate	\$	. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	☐\$ <u></u>	□\$100,000
	Construction or leasing of plant buildings and facilities		T\$ 25,000
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness		\$
	Working capital		
	Other (specify):		. 🗆 \$
	·	\$	. 🗆 \$
	Column Totals	s 60,000	<u>\$291,000</u>
	Total Payments Listed (column totals added)	\$35	51,000
*	D. FEDERAL SIGNATURE		
sig	the issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice that the constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Common information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ission, upon writte	
	suer (Print or Type) Signature	Date	
	CME Payment Systems Corp.	23 July	, 2003
Na	ame of Signer (Print or Type) Title of Signer (Print or Type)	ι	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.

Robert Lee

- ATTENTION -----

President

			44									
	E. STATE SIGNATURE											
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No									
	See Appendix, Column 5, for state response.											
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.											
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furni	ished by the									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.											
	ther has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalthorized person.	f by the	undersigned									
Issuer (	Print or Type)   Signature   / /   Date											
(	Payment Systems Corp. 23 July,	2000	7									
ACME	Payment Systems Corp.	$\frac{\omega}{\omega}$	<u> </u>									
Name (	Print or Type)											

President

#### Instruction:

Robert Lee

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

•	
APPENDIX	Production and the state of the
4	5 Disqual
Tune of investor and	Disqual under State (if yes,

,l	Intend to non-a investor	to sell ccredited s in State ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	X								
СО									
СТ									
DE									
DC									
FL	X								
GA									
ні						:			
ID									
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ΙA									
KS							1		
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MI									
MN									
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8.933		200	1000	100	X
39° (SE	-	S 149	E Par	36.3	100

l		2	3  Type of security					5 Disqual	ification	
	to non-a	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)		amount p	of investor and urchased in State rt C-Item 2)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ					<del> </del>					
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
ОК										
OR						1	,			
PA										
RI										
SC										
SD			,							
TN										
TX										
UT										
VT										
VA										
WA	X									
wv	X									
WI										

8 of 9

ΑP	100	88.5	<b>1</b> 24	

1	Intend to non-a investor	2 If to sell accredited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

#### CERTIFICATION REGARDING SECURITIES BACKGROUND

THE UNDERSIGNED hereby represents and certifies as follows:

- 1. The undersigned has not filed any registration statement which is the subject of a currently effective registration stop order entered pursuant to the Securities Act of Washington, Chapter 21.20, RCW, or any other state's securities law, within six years prior to the date of this document.
- 2. The undersigned has not been convicted, within eleven years prior to the date of this document, of any felony or misdemeanor in connection with the offer, purchase or sale of any security or any felony involving fraud or deceit, including but not limited to, forgery, embezzlement, obtaining money under false pretenses, larceny or conspiracy to defraud.
- 3. The undersigned is not currently subject to any state administrative enforcement order or judgment entered by the Washington State Administrator of Securities or any other state's securities administrator, within six years prior to the date of this document, and is not subject to any state administrative enforcement order or judgment in which fraud or deceit, including but not limited to making untrue statements of material facts and omitting to state material facts, was found and the order or judgment was entered within six years prior to the date of this document.
- 4. The undersigned is not subject to an order or judgment of the Washington State Administrator of Securities or any other state's administrative enforcement order or judgment which prohibits, denies or revokes the use of any exemption from registration in connection with the offer, purchase or sale of securities.
- 5. The undersigned is not currently subject to any order, judgment or decree of any court of competent jurisdiction, temporarily or preliminarily restraining or enjoining, or is not

subject to any order, judgment or decree of any court of competent jurisdiction, permanently restraining or enjoining the undersigned from engaging in or continuing any conduct or practice in connection with the purchase or sale of any security or involving the making of any filing with the State of Washington or any state entered within six years prior to the date of this document.

DATED: 23 July 2003

Name:

### FORM U-2 UNIFORM CONSENT TO SERVICE OF PROCESS

KNOW ALL MEN BY	THESE PRESENTS:		,
That the undersigned	ACME Payment Systems Corp	•	, 🗹 a corporation,
partnership, duther	organized	under the laws ofBri	tish Columbia, Canada or
☐an individual for purpos	ses of complying with the laws of the	States indicated heround	ler relating to either the registration
or sale of securities, herel	by irrevocably appoints the officers	of the States so designate	d hereunder and their successors
in such offices, its attorne	y in those States so designated upo	n whom may be served a	ny notice, process or pleading in
any action or proceeding	against it arising out of, or in connec	tion with, the sale of secu	rities or out of violation of the
aforesaid laws of the State	es so designated; and the undersign	ned does hereby consent t	that any such action or proceeding
against it may be commer	nced in any court of competent juris	diction and proper venue	within the States so designated
hereunder by service of p	rocess upon the officers so designa	ted with the same effect a	s if the undersigned was organized
or created under the laws	of that State and have been served	d lawfully with process in t	hat State.
It is requested that a	copy of any notice, process, or plead	ding served hereunder by	mailed to:
Adam G. Snyder			
777 108th Avenue	N.E., Suite 1900, Bellevu	ME e, WA 98004	
777 2000111101100		RESS	
Place a "✓" before the r	names of all the States for which	the person executing this	form is appointing the designated
Officer of that State as its	attorney in that State for receipt of	service of process:	
☐ ALABAMA	Secretary of State	☐ DELAWARE	Securities Commissioner
□ALASKA	Administrator of the Division	☐ DISTRICT OF	Public Service
	of Banking and Corporations, Department of	COLUMBIA	Commissioner
	Commerce and Economic	✓ FLORIDA	Department of Banking and
	Development		Finance
☐ ARIZONA	The Corporation Commission	☐ GEORGIA	Commissioner of Securities
	Commission	☐ GUAM	Administrator, Department
ARKANSAS	The Securities Commissioner		of Finance
	Commissioner	☐ HAWAII	Commissioner of Securities
☑ CALIFORNIA	Commissioner of Corporations	☐ IDAHO	Director, Department of
	·		Finance
COLORADO	Securities Commissioner	☐ ILLINOIS	Secretary of State
☐ CONNECTICUT	Banking Commissioner		•
□IOWA	Commissioner of Insurance	☐ INDIANA	Secretary of State
□KANSAS	Secretary of State	Поню	Secretary of State

KENTUCKY	Director, Division of Securities	OREGON	Director, Department of Insurance and Finance
LOUISIANA	Commissioner of Securities	☐ OKLAHOMA	Securities Administrator
MAINE	Administrator, Securities Division	*** PENNSYLVANIA	Pennsylvania does not require filing of a Consent to Service of Process.
MARYLAND	Commissioner of the Division of Securities	PUERTO RICO	Commissioner of Financial Institutions
MASSACHUSETTS	Secretary of State	☐ RHODE ISLAND	Director of Business
MICHIGAN	Administrator, Corporation	- MODE NOT MID	Regulation
	and Securities Bureau, Department of Commerce	☐ SOUTH CAROLINA	Secretary of State
MINNESOTA	Commissioner of Commerce	☐ SOUTH DAKOTA	Secretary of State
MISSISSIPPI	Secretary of State	TENNESSEE	Commissioner of Commerce and Insurance
MISSOURI	Securities Commissioner	☐ TEXAS	
MONTANA	State Auditor and		Securities Commissioner
_	Commissioner of Insurance	☐ UTAH	Director, Division of Securities
NEBRASKA	Director of Banking and Finance	VERMONT	Com. of Banking, Ins., Securities & HCA
□NEVADA	Secretary of State	☐ VIRGINIA	Clerk, State Corporation
☐ NEW HAMPSHIRE	Secretary of State	<del>-</del>	Commission
☐ NEW JERSEY	Chief, Securities Bureau	☑ WASHINGTON ✓	Director of the Department of Financial Institutions
☐ NEW MEXICO	Director, Securities Division	WEST VIRGINIA	Commissioner of Securities
☐ NEW YORK	Secretary of State	WISCONSIN	Commissioner of Securities
☐ NORTH CAROLINA	Secretary of State	WYOMING	Secretary of State
☐ NORTH DAKOTA	Securities Commissioner		
Dated this 23rd da	y of July , 2003.	By Robert Lee	
	,	By KUDENT Lee	
(SEAL)	<b>)</b> .	President / C	CEO

#### CORPORATE ACKNOWLEDGMENT

State or Province of	Washington	)	
County of King		) ss.	
On this 23rd	day ofJuly	_, 2003 _, before me _ Lisa White	the
undersigned officer, p	personally appeared Robe	ert Lee	known
personally to me to b	e the President/CEO	of the above named corpor	ation and acknowledged that he
		d the foregoing instrument for the purpo	
the name of the corp	oration by himself as an offi	cer.	
IN WITNESS WHER	EOF I have here and set in NHTARY OF ARY OF WASHINGTON EXPENSE OF WASHINGTON AND INDIVIDUAL OF	16: 17 11/1/V / / / / / / / / / / / / / / / /	
State or Province of		1	
On this	day of	,, before me	, the
undersigned officer, į	personally appeared		to me
personally known an	d known to me to be the sa	me person(s) whose name(s) is (are) s	signed to the foregoing instrument,
and acknowledged th	ne execution thereof for the	uses and purposes therein set forth.	
IN WITNESS WHER	EOF I have hereunto set m	y hand and official seal.	
		NOTARY PUBLIC/COMMISSIONER OF OATHS	
		My commission cyniros:	

# INSTRUCTIONS TO FORM U-2 UNIFORM CONSENT TO SERVICE OF PROCESS

- 1. The name of the issuer is to be inserted in the blank space on line 1 of Uniform FORM U-2 ("Form").
- 2. The type of person executing the Form is to be described by striking out the inapplicable nomenclature in lines 2 4 and, if appropriate, by inserting a description of the person in the blank space provided on line 2 of the form.
- 3. The name of the jurisdiction under which the issuer was formed or is to be formed is to be inserted in the blank space on line 3 of the Form.
- 4. The person to whom a copy of any notice, process or pleading which is served pursuant to the Consent to Service of Process is to be inserted in the appropriate blank spaces at the end of page 1 of the Form.
- 5. A "\( \nabla \)" is to be placed in the space before the names of all States which the person executing this Form lawfully is appointing the officer of each State so designated on the Form as its attorney in that State for receipt of service of process.
- 6. A manually signed Form must be filed with each State requiring a Consent to Service of Process on FORM U-2 at the office so designated by the laws or regulations of that State and must be accompanied by the exact filing fee, if any.
- 7. The Form must be signed by the issuer. If the issuer is a corporation, it should be signed in the name of the corporation by an executive officer duly authorized; if a partnership, it should be signed in the name of the partnership by a general partner, and if an unincorporated association or other organization which is not a partnership, the Form should be signed in the name of such organization by a person responsible for the direction or management of its affairs.
- 8. If the Form is mailed, it is advisable to send it by registered or certified mail, postage prepaid, return receipt requested.

#### FORM U-2A UNIFORM CORPORATE RESOLUTION

# UNIFORM FROM OF CORPORATE RESOLUTION OF

ACME Payment	Systems	Corp.			
(Name of Corporation)					

RESOLVED, that it is desirable and in the best interest of this Corporation that its securities be qualified or registered for sale in various states; that the President or any Vice President and the Secretary or an Assistant Secretary hereby are authorized to determine the states in which appropriate action shall be taken to qualify or register for sale all or such part of the securities of this Corporation as said officers may deem advisable; that said officers are hereby authorized to perform on behalf of this Corporation any and all such acts as they may deem necessary or advisable in order to comply with the applicable laws of any such states, and in connection therewith to execute and file all requisite papers and documents, including, but not limited to, applications, reports, surety bonds, irrevocable consents and appointments of attorneys for service of process; and the execution by such officers of any such paper or document or the doing by them of any act in connection with the foregoing matters shall conclusively establish their authority therefor from this Corporation and the approval and ratification by this Corporation of the papers and documents so executed and the action so taken.

#### **CERTIFICATE**

The undersigned hereby certifies that he is the	President	Secretary
of ACME Payment Systems Corp.	, a corporation org	anized and existing
under the laws of the State of British Columbia, (	Canada; that the foregoing	is a true and correct
copy of a resolution duly adopted at a meeting of t	he Board of Directors of sa	id corporation held
on the <u>23rd</u> day of <u>July</u> , <u>2003</u> , at wh	nich meeting a quorum was	s at all times present
and acting; that the passage of said resolution was	in all respects legal; and t	hat said resolution is
in full force and effect.		
Dated this Z3rd day of July, 2003		2
(CORPORATE SEAL)	President / Secret	ary